

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>11-17-04</u>		2 Serial/Patent # <u>09/905,674</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
<input checked="" type="checkbox"/>	Notice of Appeal/Appeal	<u>9/24/10</u>	<u>9/24/04</u>	\$ <u>165⁰⁰</u>							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
			7 TOTAL AMOUNT OF REFUND								
			\$ <u>165⁰⁰</u>								
8 TO BE REFUNDED BY:											
10 REASON:		<input checked="" type="checkbox"/> Treasury Check <input checked="" type="checkbox"/> Credit Deposit A/C #:									
	Overpayment	9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">5</td> <td style="width: 20px;">0</td> <td style="width: 20px;">--</td> <td style="width: 20px;">0</td> <td style="width: 20px;">2</td> <td style="width: 20px;">6</td> <td style="width: 20px;">9</td> </tr> </table>			5	0	--	0	2	6	9
5	0	--	0	2	6	9					
<input checked="" type="checkbox"/>	Duplicate Payment										
	No Fee Due (Explanation):										
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>WAN LAYMAN</u>		TITLE: <u>pt. Exam.</u>									
SIGNATURE: <u>Wan Layman</u>		PHONE: _____									
OFFICE: _____											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: _____		DATE: _____									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: